

STATE OF IOWA

TERRY E. BRANSTAD, GOVERNOR KIM REYNOLDS, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES CHARLES M. PALMER, DIRECTOR

INFORMATIONAL LETTER NO. 985

DATE: February 4, 2011

TO: Iowa Medicaid Pharmacy and Home Health Agency Providers

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise

RE: Flu Vaccines for Children Administered by Pharmacies

EFFECTIVE: November 1, 2010

*****This letter replaces Informational Letter 948, issued October 1, 2010*****

Beginning November 1, 2010, the Iowa Medicaid Enterprise (IME) announced it would reimburse pharmacies who administer influenza vaccinations for children age 18 and under. Informational Letter 948 (IL 948) described how to bill for these services but was not complete and fully accurate. This letter replaces the previous instructions on how to bill for this service.

Enrollment in VFC: As described in IL 948, pharmacies must enroll in the Vaccines for Children (VFC) Program through the lowa Department of Public Health and follow that process to qualify (and submit vaccine supply orders). Details are available at http://www.idph.state.ia.us/adper/vaccines for children.asp.

Billing: The IME will pay pharmacies for administration of influenza vaccinations for covered Medicaid members aged 18 and under when the vaccine is covered under the VFC program. The following codes can be billed to Iowa Medicaid, making note of changes to the effective dates in bold:

Influenza codes: (will pay at zero, but will be replaced by the VFC program supplies)

90655	Influenza virus vaccine, split virus, preservative free, when administered
	to children 6-35 months of age, for intramuscular use
90656	Influenza virus vaccine, split virus, preservative free, when administered
	to individuals 3 years and older, for intramuscular use
90657	Influenza virus vaccine, split virus, when administered to children 6-35
	months of age, for intramuscular use
90658	Influenza virus vaccine, split virus, when administered to individuals 3
	years of age and older, for intramuscular use. Effective through
	12/31/10.

90660 Influenza virus vaccine, live, for intranasal use

Q2035 Influenza virus vaccine, split virus, when administered to individuals 3

years of age and older, for intramuscular use (Afluria). Effective

01/01/11.

Q2037	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Fluvirin). Effective 01/01/11.
Q2038	Influenza virus vaccine, split virus, when administered to individuals 3 years of age or older, for intramuscular use (Fluzone). Effective 01/01/11 .
Q2039	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (not otherwise specified). Effective 01/01/11.

Administration Codes: (will be paid at the Medicaid fee schedule)

90471 Immunization administration (includes percutaneous, intradermal,

subcutaneous or intramuscular injections); 1 vaccine (single or

combination vaccine/toxoid) \$5.04

90473 Immunization administration by intranasal or oral route; 1 vaccine (single

or combination vaccine/toxoid) \$12.76

Billing Instructions

*Pharmacies must enroll with the VFC program.

The process has not changed for pharmacies that dispense influenza vaccine.

This does not apply to the Home Health Services immunization benefit that must be provided in the child's home.

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909 or locally (in Des Moines) at 256-4609, or e-mail at imeproviderservices@dhs.state.ia.us.

^{*}Claims must be submitted on a CMS1500 claim form.

^{*}The vaccine code must be billed on the same claim form as the administration code.

^{*}The vaccine code must be billed at zero dollars.